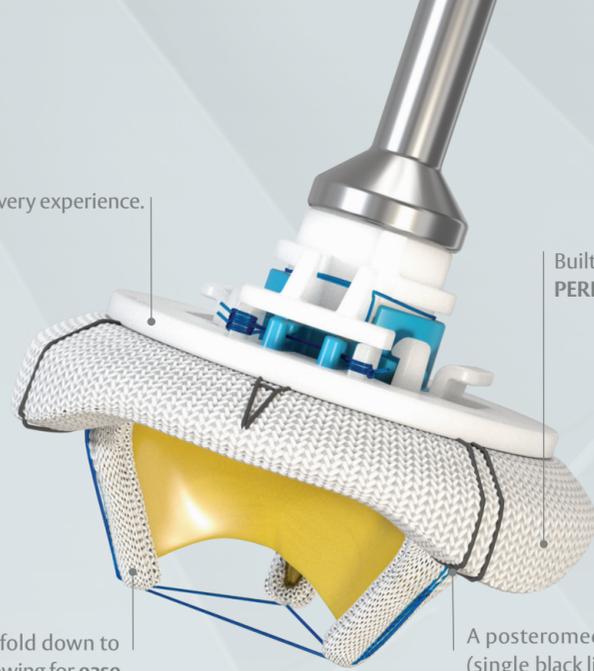


Enhanced delivery experience.



Built on the Carpentier-Edwards PERIMOUNT valve platform<sup>1</sup>

Nitinol stents fold down to 55 degrees allowing for ease of implant; stents return to original position when valve is implanted.

A posteromedial commissure mark (single black line), an anterolateral commissure mark (double black line), and an anterior segment mark ("A" mark). The black commissure markers facilitate the orientation of the valve and help avoid obstruction of the left ventricular outflow tract by stent posts.

The MITRIS mitral valve is made with RESILIA tissue for decreased calcification\*, this is the mitral valve developed with your patient's quality of life in mind.

Here you have a valve choice designed to handle the pressure of the mitral position.

Talk to your rep or visit [edwards.com/gb/MITRIS](https://www.edwards.com/gb/MITRIS) to find out more.

\*No clinical data are available that evaluate the long-term impact of RESILIA tissue in patients. Additional clinical data for up to 10 years of follow-up are being collected to monitor the long-term safety and performance of RESILIA tissue.

Models available in odd sizes 25–33mm		Accessories - Sizers	Handle
11400M25	11400M31	Individual barrel sizers 1173B	Reusable Handle 1140M
11400M27	11400M33	Complete barrel set SET1173B	
11400M29		Individual replica sizers 1173R Complete replica set SET1173R	

**References:**

1. Bourguignon T, et al. Very long-term outcomes for mitral valve replacement with the Carpentier-Edwards pericardial bioprosthesis: 25-year follow-up of 450 implantations. *J Cardiothorac Surg.* 2014;148(5):2004-11.
2. Flameng W, et al. A randomized assessment of an advanced tissue preservation technology in the juvenile sheep model. *J Thorac Cardiovasc Surg.* 2015; 149:340–5.
3. Beaver T, Bavaria JE, Griffith B, et al. Seven-year outcomes following aortic valve replacement with a novel tissue bioprosthesis. Presented at the 103rd Annual Meeting of the American Association for Thoracic Surgery, May 2023.
4. Bartus K, Litwinowicz R, Bilewska A, et al. Final 5-year outcomes following aortic valve replacement with a RESILIA tissue bioprosthesis. *Eur J Cardiothorac Surg.* 2021;59(2):434-41.
5. Heimansohn DA, Baker C, Rodriguez E, et al. Mid-term outcomes of the COMMENCE trial investigating mitral valve replacement using a bioprosthesis with a novel tissue. *Ann Thorac Surg.* 2023;115(6):1429-1436.

\*No clinical data are available that evaluate the long-term impact of RESILIA tissue in patients. Additional clinical data for up to 10 years of follow-up are being collected to monitor the long-term safety and performance of RESILIA tissue.

Medical device for professional use. For a listing of indications, contraindications, precautions, warnings, and potential adverse events, please refer to the Instructions for Use (consult [edwards.com](https://www.edwards.com) where applicable).

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# MITRIS RESILIA Mitral Valve

Designed to handle the pressure of the mitral position



## We designed the MITRIS RESILIA mitral valve:

- > To be conformable and seat well on the mitral annulus
- > To be a replacement option similar to the native valve
- > To handle the pressure of the mitral position

Learn what the MITRIS valve can do for you and your patients.



Edwards

## When replacement is the best choice, what if you had an option designed to be similar to the native valve?

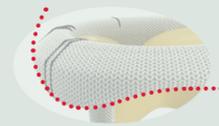
When your patient's disease may be too complex, and mitral valve repair is not feasible, Edwards Lifesciences brings you the MITRIS RESILIA mitral valve.

As your trusted partner in cardiac surgery innovation, Edwards has developed the MITRIS RESILIA mitral valve to help meet the specialized needs of your patients. We understand the mitral valve and that the skill required to repair or replace it commands your respect. That's why we designed a replacement valve built for the mitral position.



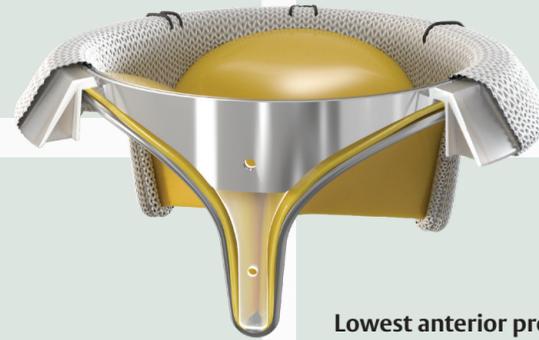
### How the MITRIS valve handles the pressure of the mitral position:

**A saddle-shaped** sewing cuff that mimics the native mitral annulus. This asymmetrical design is specifically tailored to the contours of the native annulus.



**RESILIA tissue\*** is designed to offer enhanced tissue anti-calcification technology that will potentially allow the valve to last longer.

Dry storage to **eliminate need** for rinsing.



**Good visibility under fluoroscopy** for easy identification of the landing zone for potential future transcatheter interventions.

**Lowest anterior profile stents** do not obstruct blood flow through the left ventricular outflow tract (LVOT).

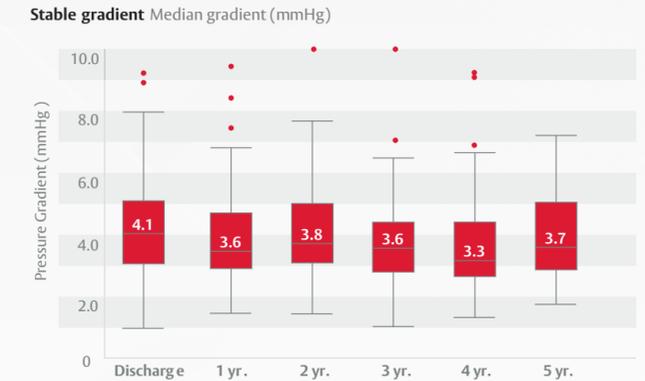
\*No clinical data are available that evaluate the long-term impact of RESILIA tissue in patients. Additional clinical data for up to 10 years of follow-up are being collected to monitor the long-term safety and performance of RESILIA tissue.

Backed by a strong and growing body of clinical evidence supported by RESILIA tissue's ongoing study of durability and hemodynamic performance<sup>2,3,4,5</sup>

#### COMMENCE Mitral clinical trial

Clinically stable hemodynamics and one incident of structural valve deterioration (SVD) through 5 years.

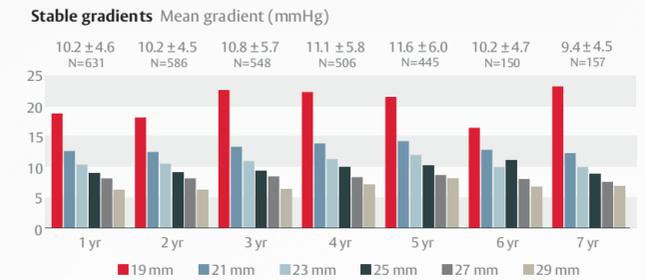
**98.7%** Actuarial freedom from SVD through 5 years



#### COMMENCE Aortic clinical trial

Clinically stable hemodynamics and two incidents of SVD through 7 years.

**99.3%** Actuarial freedom from SVD through 7 years



#### European Aortic clinical trial

Clinically stable hemodynamics and zero SVD through 5 years in 133 patients.

**100%** Actuarial freedom from SVD through 5 years

